UNITED STATES SECURITIES AND EXCHANGE COMMISSIO Washington, D.C. 20549 RECEIVED

FORM D

OMB APPROVAL

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NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR**

UNIFORM LIMITED OFFERING EXEMPTION

SEC USE ONLY						
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□ Rule 504	□ Rule 505	X Pule 504	☐ Section 4/6) ULOE
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A. BASIC ID	ENTIFICATION DA	ATA		- i
ne issuer				
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(Number and Street, C	ity, State, Zip Code)	Telephone Nun	nber (Including Area C	ode)
, CA 94107		(415) 223-390	4	1
umber and Street, City, State, Zip (Code)	Telephone Nun	nber (Including Area C	ode)
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	Rule 504 A. BASIC ID: ne issuer ment and name has changed, and i (Number and Street, C, CA 94107 umber and Street, City, State, Zip of the composition of the co	A. BASIC IDENTIFICATION DA ne issuer ment and name has changed, and indicate change.) (Number and Street, City, State, Zip Code) (CA 94107 umber and Street, City, State, Zip Code) PROCES NOV 0 6 2 I limited partnership, already formed I limited partnership, to be formed Organization: A. BASIC IDENTIFICATION DA (Number and indicate change.) (Number and Street, City, State, Zip Code) PROCES MOV 0 6 2 THOMSO FINANCIA Organization:	Rule 504 Rule 505 Rule 506 New Filing A. BASIC IDENTIFICATION DATA The issuer The issuer (Number and Street, City, State, Zip Code) Telephone Number and Street, City, State, Zip Code) Telephone Number and Street, City, State, Zip Code) Telephone Number and Street, City, State, Zip Code) Telephone Number and Street, City, State, Zip Code) Thomson Thoms	Rule 504 Rule 505 Rule 506 Section 4(6) New Filing Amendment A. BASIC IDENTIFICATION DATA The issuer The issuer (Number and Street, City, State, Zip Code) (A15) 223-3904 The imited partnership, already formed FINANCIAL Organization: Processed Month Year 2007 Actual

GENERAL INSTRUCTIONS

Federal

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230,501 et seq. or 15 U.S.C. 77d(6),

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offening, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

> Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

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Check Box(es) that Apply:	☐ Promoter	☑ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
•	name first, if individual)		· · · · · · · · · · · · · · · · · · ·		
Muller, Thor			 		<u> </u>
		Street, City, State, Zip Code) Street, 2nd Floor, San Francisco	CA 94107		!
Check	Promoter	Beneficial Owner	Executive Officer	☑ Director	General and/or
Box(es) that Apply:					Managing Partner
Becker, Lane	name first, if individual)				
		Street, City, State, Zip Code) Street, 2 nd Floor, San Francisco	, CA 94107		1
Check Boxes that Apply:	☐ Promoter	➤ Beneficial Owner	Executive Officer	☑ Director	General and/or Managing Partner
Muller, Amy	name first, if individual)				
	Unlimited, Inc., 370 Brannan	Street, City, State, Zip Code) Street, 2 nd Floor, San Francisco	, CA 94107		
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Las	name first, if individual)				ŀ
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			1
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Las	name first, if individual)				!
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	Director	General and/or Managing Partner
Full Name (Last	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			
Check Boxes that Apply:	Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Las	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)	_		
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	☐ Director	General and/or Managing Partner
Full Name (Las	name first, if individual)				
Business or Res	idence Address (Number and	Street, City, State, Zip Code)			

				В	. INFORM	IATION AB	OUT OFFE	ERING	_			
1.	Has the issuer s	old, or does the	issuer intend to					? g under ULOF			Y.es N	0 <u>X</u>
2.	What is the min	imum investme	nt that will be a	eccepted fro	m any indivi	idual?			•	,	, \$	N/A
3.	Does the offerin	ng permit joint o	wnership of a s	ingle unit?							Yes X N	o
4.	solicitation of pregistered with	purchasers in co	nnection with with a state or	sales of se- states, list ti	curities in the name of t	he offering. he broker or	If a person	to be listed	is an associat	ed person or	agent of a	emuneration for broker or dealer ersons of such a
Non	e										1	
	Name (Last nam	ne first, if individ	lual)								i	
											· .	
Bus	iness or Residence	ce Address (Nun	nber and Street,	, City, State	, Zip Code)						1	
Nan	ne of Associated	Broker or Deale	<u></u> г		_						1	
											•	
State	es in Which Pers	on Listed Has S	olicited or Inter	ids to Solici	it Purchasers							
(Che	eck "All States"	or check individ	ual States)				,	1**1*11*11*11**1				All States
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Full	Name (Last nam	ne first, if individ	lual)								•	
									_		!	
Busi	iness or Residence	e Address (Nun	nber and Street,	City, State	, Zip Code)							
Nam	ne of Associated	Broker or Deale								· <u></u> -	1	
State	es in Which Pers	on Listed Has S	olicited or Inter	nds to Solici	t Purchasers							
(Cho	eck "All States"	or check individ	ual States)					• • • • • • • • • • • • • • • • • • • •	******************		· · · · · · · · · · · · · · · · · · ·	All States
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Full	Name (Last nam	e first, if individ	lual)								ı	
Busi	ness or Residence	ce Address (Nun	nber and Street,	City, State	, Zip Code)							
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Nam	ne of Associated	Broker or Deale:	r								1	
State	es in Which Pers	on Listed Has So	olicited or Inter	ds to Solici	t Purchasers	;						
	ck "All States" o						.,,		************	• • • • • • • • • • • • • • • • • • • •	*****	All States
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											1	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

transaction is an exchange offering, check this box	If the
Debt Sold Debt S 335,000,00 \$ 335,000,00 \$ 335,000,00 \$ \$ 335,000,00 \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$ \$	_
Debt	.,
Equity	1.00
Convertible Securities (including warrants)	
Convertible Securities (including warrants)	_
Partnership Interests	
Other (Specify) \$\$ Total \$ 335,000,00 \$ 335,000.00 Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this	
Total	
Answer also in Appendix, Column 3, if filing under ULOE. 2. Enter the number of accredited and non-accredited investors who have purchased securities in this	
2. Enter the number of accredited and non-accredited investors who have purchased securities in this	<u>),00</u>
offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	
Number Aggregate	
Investors Dollar Amount	.t
of Purchases	
Accredited Investors	0.00
Non-accredited Investors	0
Total (for filings under Rule 504 only)	
Answer also in Appendix, Column 4, if filing under ULOE.	
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.	
Type of Dollar Amount	t
Security Sold	
Type of Offering	
Rulé 505	
Regulation A	
Rule 504	
Total	
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	
Transfer Agent's Fees	0
Printing and Engraving Costs	0
Legal Fees	0.00
Accounting Fees \$	0
Engineering Fees	0
	<u>~</u>
	<u> </u>
Total	
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C. OFFERING PRICE, NUMBER OF	INVESTORS, EXPENSES AND	USE OF PROCEEDS	:
 Enter the difference between the aggregate offering price given in r in response to Part C – Question 4.a. This difference is the "adjuste 	esponse to Part C - Question 1 and gross proceeds to the issuer"	d total expenses furnished	\$325,000.00
5. Indicate below the amount of the adjusted gross proceeds to the issuer of the amount for any purpose is not known, furnish an estimate and payments listed must equal the adjusted gross proceeds to the issuer set	check the box to the left of the	estimate. The total of the	1
pay		Payment to Officers, Directors, & Affiliates	Payment To Others
Salaries and fees		□ s	🕆 s
Purchase of real estate		□ s	\$
Purchase, rental or leasing and installation of machinery and equipment	***************************************		□ \$
Construction or leasing of plant buildings and facilities	***************************************	□ s	
Acquisition of other businesses (including the value of securities involved in exchange for the assets or securities of another issuer pursuant to a merger		□ s	
Repayment of indebtedness	•	□ s	
Working capital		□ s	x 325,000.00
Other (specify):			1
		□ s	□ s □ s
Column Totals		□ s	
Total Payments Listed (column totals added)		□ s	1
Total Caymens Listed (Column totals added)		<u> </u>	325,000.00
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D. Priv	PDAL CIONATURE		· · · · ·
	DERAL SIGNATURE		
The issuer had duly caused this notice to be signed by the undersigned duly an undertaking by the issuer to furnish to the U.S. Securities and Exchange non-accredited investor pursuant to paragraph (b)(2) of Rule 502.			
Issuer (Print or Type)	Signature	$\overline{\mathcal{M}}$	Date
Satisfaction Unlimited, Inc.	dry lu		19/20/07
Name of Signer (Print or Type)	Title of Signer (Purit or Type)		
Amy Muller	Chief Community Officer, Chie	of Financial Officer and Sec	cretary
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A	ATTENTION		

	E. STAT	E SIGNATURE	,	
1.	Is any party described in 17 CFR 230.262 presently subject to any of the dis	qualification provisions of such rule?	Yes	No X
	See Appendix, Col	umn 5, for state response.		
2.	The undersigned issuer hereby undertakes to furnish to the state administration such times as required by state law.	ator of any state in which the notice is filed, a notice on Form	D (17 CFR 2	39.500) at
3.	The undersigned issuer hereby undertakes to furnish to any state administrat	ors, upon written request, information furnished by the issuer to	offerees.	
4.	The undersigned issuer represents that the issuer is familiar with the cond (ULOE) of the state in which this notice is filed and understands that the is conditions have been satisfied.	(•	•
The per	sissuer has read this notification and knows the contents to be true and has son.	duly caused this notice to be signed on its behalf by the under	rsigned duly	authorized
lssı	er (Print or Type)	Signature	Date	•
Sat	sfaction Unlimited, Inc.	dry lly	9/20	7010
Nai	ne (Print or Type)	Title (Print or Type)		
Am	y Muller	Chief Community officer, Chief Financial Officer and Secretar	У	

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 5 3 Disqualification Type of security under State ULOE (if yes, attach Intend to sell and aggregate Type of investor and amount purchased in State (Part C-Item 2) to non-accredited offering price investors in State offered in state explanation of waiver granted (Part E-Item (Part B-Item 1) (Part C-Item 1) 1) Number of Yes No No Yes Number of Amount State Amount Accredited Non-Accredited **Investors** Investors ΑL ΑK ΑŻ AR Х \$285,000.00 Х CA Promissory Notes 0 0 CO CT DE DC FĻ GA HI ΊD ĪL, IN ΙA KS ΚY LΑ ME MD MA МІ

MN MS MQ

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1		2	3	3					
	to non- investo	nd to sell accredited rs in State B-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	រូវបា	Type of investor and			Disqualification under State ULOE (if yes, attach explanation of waiver granted (Part E- Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non- Accredited Investors	Amount	Yes	No
MT								-	
NE			 						
NV									
• NH				-					
NJ									
NM									
NY	. ,	<u> </u>							
NC			-						
ND						-			
ОН	_		- 						
OK									
OR							· · · · · · · · · · · · · · · · · · ·		
PA		X	Promissory Notes	1	\$50,000.00	0	0		х
RI				 					<u>-</u>
SC				 					<u> </u>
SD	-		 				<u> </u>		
TN			 	<u> </u>					
TX		_	 	<u> </u>					
UT			 			<u> </u>			
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VA			 						
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